FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 24 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00032574 1 NAME TITLE; FIRST; MI OFFICE USE ONLY The Honorable Dennis H. **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 06/24/2019 Bonnen 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # PO Box 279 HD / PM Amount Austin, TX 78767 Date Processed (CHECK IF FILER'S HOME ADDRESS) **TELEPHONE** AREA CODE PHONE NUMBER; EXTENSION Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER State Representative (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD _____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). SPOUSE Mrs. Kimberly Bonnen **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD __ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Heritage Bank ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE 1850 Pearland Parkway Pearland, TX 77581 **POSITION HELD** President and CEO NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Texas House of Representatives ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; STATE: 112 East 11th Street Austin, TX 78768 POSITION HELD State Representative NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD ___ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check if Filer's Home Address) X EMPLOYED BY ANOTHER **EMPLOYER** Locke Lord LLP ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE; 600 Travis Houston, TX 77002 POSITION HELD Of counsel

SELF-EMPLOYED

NATURE OF OCCUPATION

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** R&K Disributors, Inc. ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1302 E. Whaley Longview, TX 75601 POSITION HELD **Board Member** NATURE OF OCCUPATION SELF-EMPLOYED

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 BUSINESS ENTITY						
	NAME GENERAL ELECTRIC COMPANY (GE)					
2 STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)		
3 NUMBER OF SHARES	X LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999		
	LESS THAN 10K	10,000 OR MORE				
4 IF SOLD NET GAIN X NET LOSS	X LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE		
BUSINESS ENTITY	Heritage Bancorp, Inc	1	NAME			
STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)		
NUMBER OF SHARES	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999		
	LESS THAN 10K	X 10,000 OR MORE				
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE		
BUSINESS ENTITY			NAME			
	ConocoPhillips (COP)					
	Conocornilips (COF)					
STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)		
		X SPOUSE 100 TO 499	DEPENDENT CHILD	1,000 TO 4,999		
ACQUIRED BY	X FILER					
ACQUIRED BY	X FILER X LESS THAN 100	100 TO 499				
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	X FILER X LESS THAN 100 LESS THAN 10K	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999	1,000 TO 4,999		
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE		
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 CHESAPEAKE ENERGY	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999 NAME	1,000 TO 4,999 \$25,000OR MORE		
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 CHESAPEAKE ENER X FILER	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE		
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 CHESAPEAKE ENER X FILER LESS THAN 100	100 TO 499 10,000 OR MORE \$5,000 - \$9,999 GY CORP SPOUSE X 100 TO 499	500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE		

STOCK PART 2

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1	BUSINESS ENTITY	Seventy Seven Energy		NAME	
2	STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	·
3	NUMBER OF SHARES	X LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
		LESS THAN 10K	10,000 OR MORE		
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	Pfizer		NAME	
	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	·
	NUMBER OF SHARES	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
		LESS THAN 10K	10,000 OR MORE		
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	DUCINECC ENTITY		-	NIANAE	
	BUSINESS ENTITY	Paypal Holdings	ı	NAME	
	BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	Paypal Holdings X FILER	X SPOUSE	NAME DEPENDENT CHILD	·
	STOCK HELD OR				
	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	_
	STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100	X SPOUSE X 100 TO 499	DEPENDENT CHILD	_
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	X FILER LESS THAN 100 LESS THAN 10K	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Lowes Companies	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Lowes Companies X FILER	 X SPOUSE X 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE 	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Lowes Companies X FILER LESS THAN 100	 X SPOUSE X 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE X 100 TO 499 	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Growth Fund of Ameri		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	□ 500 ТО 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	New Perspective Fund		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	MUTUAL ELIND			NAME	
	MUTUAL FUND	New World Fund Class		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	New World Fund Class		NAME DEPENDENT CHILE)
	SHARES OF MUTUAL FUND		S A		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER X LESS THAN 100	S A SPOUSE 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	X FILER X LESS THAN 100 5,000 to 9,999	S A SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	S A SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Fundamental Investors	S A SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER X LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Fundamental Investors X FILER LESS THAN 100	S A SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 S Fund Class A SPOUSE X 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Fundamental Investors		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Growth Fund of Ameri		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
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E					
	MUTUAL FUND	American Balanced Fu		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	American Balanced Fu		NAME DEPENDENT CHILE)
	SHARES OF MUTUAL FUND		und Class B		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	SPOUSE X 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999	Ind Class B ☐ SPOUSE ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999	Ind Class B ☐ SPOUSE ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	Ind Class B ☐ SPOUSE ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Capital World Growth	SPOUSE SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 & Income Class A	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Capital World Growth X FILER X LESS THAN 100	SPOUSE SPOUSE SPOUSE SPOUSE S\$,000 - \$9,999 S\$,000 - \$9,999 S\$ Income Class A SPOUSE 100 TO 499 S\$	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Capital World Growth		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		I			
	MUTUAL FUND	New World Fund - 529		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		•			
		Ī			
	MUTUAL FUND	New World Fund 529 I		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	New World Fund 529 I		NAME X DEPENDENT CHILD) 1, 2
	SHARES OF MUTUAL FUND		3		1, 2 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	SPOUSE X 100 TO 499	X DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	FILER LESS THAN 100 5,000 to 9,999	SPOUSE X 100 TO 499 10,000 OR MORE	X DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	FILER LESS THAN 100 5,000 to 9,999	SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 American Balanced Fu	SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 American Balanced Fu X FILER LESS THAN 100	SPOUSE X 100 TO 499	X DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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_					
1	MUTUAL FUND	Fundamental Investors		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		I			
	MUTUAL FUND	The Growth Fund of A		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		ī			
	MUTUAL FUND	The Growth Fund of A		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	The Growth Fund of A		X DEPENDENT CHILD) 1,2
	SHARES OF MUTUAL FUND		merica - 529 B		1, 2 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	merica - 529 B SPOUSE 100 TO 499	X DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 5,000 to 9,999	merica - 529 B SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999	merica - 529 B SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD X 500 TO 999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	merica - 529 B SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Capital World Growth	merica - 529 B SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Capital World Growth FILER LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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1	MUTUAL FUND	Capital World Growth	۱ Income Fund - 529 B &	NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Fundamental Investors		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
┕		<u>I</u>			
	MUTUAL FUND	Allianz OCC Renassai		NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Allianz OCC Renassai		NAME DEPENDENT CHILD)
	SHARES OF MUTUAL FUND		ce C		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	Ce C SPOUSE X 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999	Ce C SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999	Ce C SPOUSE X 100 TO 499 D 10,000 OR MORE S5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	Ce C SPOUSE X 100 TO 499 D 10,000 OR MORE S5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Europacific Growth Fu	Ce C SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Europacific Growth Fu X FILER X LESS THAN 100	Ce C SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 nd Class A SPOUSE 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Small Cap World Fund		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	X DEPENDENT CHILD	1, 2
3	NUMBER OF SHARES OF MUTUAL FUND	X LESS THAN 100 5,000 to 9,999	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	First Trust Capital Stre	ngth Portfolio Series 24	NAME I	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	MUTUAL FUND			NAME	
	MUTUAL FUND	First Trust Cloud Com	puting Portfolio Series 1		
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	First Trust Cloud Com)
	SHARES OF MUTUAL FUND		puting Portfolio Series 1	.0	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	x SPOUSE	.0 DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	FILER LESS THAN 100 5,000 to 9,999	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 First Trust Internationa	puting Portfolio Series 1 X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 First Trust Internationa FILER LESS THAN 100	puting Portfolio Series 1 X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 Al Capital Strength 20 X SPOUSE 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	X 1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME First Trust Target Global Dividend Leaders SHARES OF MUTUAL FUND X SPOUSE DEPENDENT CHILD __ HELD OR ACQUIRED BY FILER NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100 100 TO 499 500 TO 999 X 1,000 TO 4,999 5,000 to 9,999 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Wells Fargo Dealer S	Services			
2 LIABILITY OF	FILER	X SPOUSE	DEPENDENT CHILD		
3 GUARANTOR	NONE				
4 AMOUNT	X \$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Suntrust Mortgage				
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILD		
GUARANTOR	NONE				
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	IBC Bank				
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILD		
GUARANTOR	NONE				
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE		

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information abou which the child is listed on the Co	t a dependent child's activit over Sheet.	y, indicate the child about v	vhom you are reporting by pr	oviding the number under
1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE)
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	S	TREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE
3 DESCRIPTION X LOTS ACRES	1.00000 lots Brazoria		ND NAME OF COUNTY WHI	ERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	Suntrust Mortgage In	nc		
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	0 \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

	which the child is listed on the Co	3701 011001.
1	HELD OR ACQUIRED BY	X FILER SPOUSE DEPENDENT CHILD
2	DESCRIPTION	NAME AND ADDRESS X (Check if Filer's Home Address) Chios Management LLC
3	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
	HELD OR ACQUIRED BY	X FILER X SPOUSE DEPENDENT CHILD
	DESCRIPTION	NAME AND ADDRESS (Check if Filer's Home Address) Denson Texas LLC 228 Canyon Oak Drive Lake Jackson, TX 77566
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 S5,000 - \$9,999 S10,000 - \$24,999 S25,000OR MORE
F	HELD OR ACQUIRED BY	
	TILLE ON ACQUINED BY	X FILER X SPOUSE DEPENDENT CHILD
	DESCRIPTION	NAME AND ADDRESS (Check if Filer's Home Address) OMKAR Pearland Investment, LLC 12213 Rosemont Lane Pearland, TX 77584
		NAME AND ADDRESS (Check if Filer's Home Address) OMKAR Pearland Investment, LLC 12213 Rosemont Lane

TRUST INCOME PART 9 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received more than \$500 in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. SOURCE NAME OF TRUST Kimberly Martin Bonnen 2012 Trust 2 BENEFICIARY FILER X SPOUSE DEPENDENT CHILD __ 3 INCOME LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000--OR MORE ASSETS FROM WHICH Stock in R&K Distributors, Inc. **OVER \$500 WAS RECEIVED** UNKNOWN

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

	the child is listed on the Cover S	Sheet.			
1	BUSINESS ASSOCIATION	Chios Management		NAME AND ADDRESS X (Check If Filer's Home Address)	
2	BUSINESS TYPE	X Corporation Firm Partnership		Limited Partnership Profesional Association Limited Liability Partnership Joint Venture Professional Corporation Other	
3	HELD, ACQUIRED, OR SOLD BY	X FILER		SPOUSE DEPENDENT CHILD	
1	BUSINESS ASSOCIATION	Denson Texas Holdings 228 Canyon Oak Lake Jackson, TX 77566		NAME AND ADDRESS (Check If Filer's Home Address)	
2	BUSINESS TYPE	X Corporation Firm Partnership		Limited Partnership Profesional Association Limited Liability Partnership Joint Venture Professional Corporation Other	
3	HELD, ACQUIRED, OR SOLD BY	X FILER	X	SPOUSE DEPENDENT CHILD	

ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	When reporting information about the child is listed on the Cover S		, indicate the child about wh	om you are reporting by provid	ing the number under which
1	BUSINESS ASSOCIATION	Chios Management		ID ADDRESS er's Home Address)	
2	BUSINESS TYPE	Corporation			
3	HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD _	
4	ASSETS	DESCR Real estate located at 45		<u> </u>	GORY \$5,000 - \$9,999 X \$25,000 OR MORE
1	BUSINESS ASSOCIATION	Denson Texas Holdings 228 Canyon Oak Lake Jackson, TX 77566	(Check If File	ID ADDRESS er's Home Address)	
2	BUSINESS TYPE	Corporation			
3	HELD, ACQUIRED, OR SOLD BY	X FILER	X SPOUSE	DEPENDENT CHILD _	
4	ASSETS	DESCR Home Instead Senior Car	re franchise	CATE LESS THAN \$5,000 \$10,000 - \$24,999	\$5,000 - \$9,999 X \$25,000 OR MORE

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	the child is listed on the Cover S	heet.			
1	BUSINESS ASSOCIATION			ND ADDRESS iler's Home Address)	
		Chios Management	.	,	
2	BUSINESS TYPE	Corporation			
3	HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD _	
4	LIABILITIES	DESCR Mortgage on real property	RIPTION	i	EGORY
		Mortgage on real propert	y nelu by Wells Faigo	LESS THAN \$5,000	\$5,000 - \$9,999
				\$10,000 - \$24,999 I	x \$25,000OR MORE
1	BUSINESS ASSOCIATION			ND ADDRESS	
	ASSOCIATION	Dancan Tayaa Haldinga	(Check If Fi	iler's Home Address)	
		Denson Texas Holdings 228 Canyon Oak			
		Lake Jackson, TX 77566			
2	BUSINESS TYPE	Corporation			
3	HELD, ACQUIRED, OR SOLD BY	X FILER	X SPOUSE	DEPENDENT CHILD _	
4	LIABILITIES		RIPTION		EGORY
		Owner financed debt		X LESS THAN \$5,000	\$5,000 - \$9,999
				\$10,000 - \$24,999	\$25,000OR MORE

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 ORG	ANIZATION	Heritage Bancorp		
2 POSI	TION HELD	Chairman		
3 POSI	TION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
ORG	ANIZATION	Heritage Bank		
POSI	TION HELD	Chairman/CEO		
POSI	TION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
ORG	ANIZATION	Chios Management LLC		
POSI	TION HELD	President		
POSI	TION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
ORG	ANIZATION	Brazosport College Foun	dation	
POSI	TION HELD	Board member		
POSI	TION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ORG	ANIZATION	Demi's Difference		
POSI	TION HELD	Secretary		
POSI	TION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ORG	ANIZATION	Denson Texas Holdings		
POSI	TION HELD	Manager		
POSI	TION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

DRGANIZATION	R&K Distributors			
POSITION HELD	Board member			
POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD	

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST **PART 14** If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE. NAME AND ADDRESS 1 BUSINESS ENTITY Heritage Bancorp 1850 Pearland Parkway Pearland, TX 78701 2 INTEREST HELD BY X SPOUSE X FILER DEPENDENT CHILD

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	N/A Part 1B - Retainers
		N/A Part 2 - Stock
	X	N/A Part 3 - Bonds, Notes & Other Commercial Paper
		N/A Part 4 - Mutual Funds
	X	N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
		N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
		N/A Part 7B - Interests in Business Entities
	X	N/A Part 8 - Gifts
		N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	Χ	N/A Part 10B - Trustee Statement
		N/A Part 11A - Business Associations
		N/A Part 11B - Assets of Business Associations
		N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
	X	N/A Part 13 - Expenses Accepted Under Honorarium Exception
		N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Χ	N/A Part 16 - Representation by Legislator Before State Agency
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	Χ	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

he law requires the personal financial statement to be ver	rified. Without proper verification, the statement is not consider	ed filed.		
be verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the dividual required to file the personal financial statement.				
The verification page on a personal financial statement file of the individual required to file the personal financial state derson authorized by law to administer oaths and affirmation	ed with an authority other than the Texas Ethics Commission moment as wells as the signature and stamp or seal of office of a ons.	ust have the signatu notary public or othe		
	I swear, or affirm, under penalty of perjury, that this fin covers calendar year ending December 31, 2018, and and includes all information required to be reported by 572 of the Government Code.	I is true and correct		
	The Honorable Dennis H. Bonn	ien		
	Signature of Filer			
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said	, this the	day		
of, 20, to certify which,	witness my hand and seal of office.			
Signature of officer administering oath Printe	d name of officer administering oath Title of officer	r administering oath		